New England Deaconess Hospital Annual Report 1967

New England Deaconess Hospital Annual Report 1967

New England Deaconess Hospital Directory

January 1968

Contents

Officers of the Corporation 2
Executive Committee 2
Medical Administrative Board 3
Administration 4
Medical Staff
- **Department of Medicine** 5
- **Department of Pathology** 14
- **Department of Radiology** 15
- **Department of Surgery** 16

The Cancer Research Institute 24
Elliott P. Joslin Research Laboratory 24
Blood Research Institute 24

Officers of the Corporation

Chairman of the Board
Francis W. Capper
68 Monmouth St., Brookline

President
Laurens MacLure
100 Franklin St., Boston

Vice Presidents
James F. Farr
15 State St., Boston

C. Vincent Vappi
240 Sidney St., Cambridge

Treasurer
Henry S. Rogerson
10 Post Office Sq., Boston

Clerk
James T. Mountz
225 Franklin St., Boston

Executive Committee

Chairman of the Board
Francis W. Capper

President
Laurens MacLure

Treasurer
Henry S. Rogerson

Clerk of the Corporation
James T. Mountz

John Barnard, Jr.
Edward Dane
James F. Farr
R. D. Lowry
Albert Pratt
William B. Snow
Humphrey H. Swift
C. Vincent Vappi

EX OFFICIO:

Staff Representatives
Herbert D. Adams, M.D.
William A. Meissner, M.D.

Director
Richard E. Lee

Medical Administrative Board

President
William A. Meissner, M.D.

Vice President
Herbert D. Adams, M.D.

Elmer C. Bartels, M.D.
Robert F. Bradley, Jr., M.D.
Robert E. Brownlee, M.D.
Bradley E. Copeland, M.D.
Carl S. Hoar, Jr., M.D.
Allen P. Joslin, M.D.
Mirle A. Kellett, M.D.
Joseph H. Marks, M.D.
Cornelius E. Sedgwick, M.D.
James L. Tullis, M.D.

R. D. Lowry, Secretary

Administration

Executive Vice President
R. D. Lowry

Director
Richard E. Lee

Assistant Directors
Ellen Adams
Theodore F. Koch
Hubert D. Sycamore

Assistant Director and Director of Nursing
Ellen D. Howland

Night Administrator
John F. Slayton

Director of Administrative Services
Marjorie M. LeBeau

Chaplain to the Hospital
Ralph A. Curtis

Controller
Dean A. Annis

Director of Development
Maurice Fremont-Smith

Director of Dietetics
Charlotte L. Donaldson

Executive Housekeeper
Joseph E. Doherty

Laundry Manager
Roger G. Peterson

Director of Maintenance and Engineering
Donald L. Sabine

Director of Medical Record Department
E. Louise Seymour

Office Manager
Bertina Terkelsen

Director of Patient Service
Milton B. Nelson

Personnel Director
W. Dean Holdeman

Chief Pharmacist
Charles F. Schraub

Public Relations Director
Evans F. Houghton

Purchasing Agent
W. Clifford Fisher

Service Coordination Manager
Peter Campisano

Social Service Director
Lucile F. Palmer

Director of Surgical Services
Ruth E. Pendleton

Systems and Planning Manager
Priscilla H. Tinkham

Director of Volunteers
Irma A. Kellner

MEDICAL STAFF

Honorary Staff

Frank N. Allan, M.D.
Carl H. Ernlund, M.D.
Lewis M. Hurxthal, M.D.
Varaztad H. Kazanjian, M.D., D.M.D.
Everett D. Kiefer, M.D.

DEPARTMENT OF MEDICINE

Chairman
James L. Tullis, M.D.

Active Staff

Allergy and Dermatology:
John L. Fromer, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Harriet D. James, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Albert L. Sheffer, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Robert F. Tilley, M.D.*
110 Francis St., 7A
Boston 02215
Tel. 277-8332

**Dermatology only*

Cardiology:
Sidney Alexander, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Robert E. Foley, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Elmer E. Hinton, M.D.
110 Francis St., 2F
Boston 02215
Tel. 734-7227

David I. Rutledge, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Gastroenterology:
Russell S. Boles, Jr., M.D.
110 Francis St., 2H
Boston 02215
Tel. 734-7860

Robert E. Crozier, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Elmer W. Heffernon, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Joseph E. Mackie, M.D.
3 Seaward Rd.
Wellesley Hills 02181
Tel. 235-6079

Francis E. McDonough, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Richard A. Norton, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

F. Warren Nugent, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

John R. Ross, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

M. Frances H. Smith, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Martin L. Tracey, M.D.
1195 Beacon St.
Brookline 02146
Tel. 566-3141

Fred F. Whitcomb, Jr., M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Hematology:
Donat P. Cyr, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Willis R. Keene, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

John W. Norcross, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Hugh M. Pyle, M.D.
110 Francis St., 6A
Boston 02215
Tel. 734-7880

James L. Tullis, M.D.
110 Francis St., 6A
Boston 02215
Tel. 232-1210

Internal Medicine:
Theodore L. Badger, M.D.
264 Beacon St., Boston 02116
Tel. 267-3750

C. Cabell Bailey, M.D.
110 Francis St., 9D
Boston 02215
Tel. 734-4633

Carl C. Bartels, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Elmer C. Bartels, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

George O. Bell, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Robert F. Bradley, Jr., M.D.
Joslin Clinic, Boston 02215
Tel. 232-8280

Allen G. Brailey, M.D.
1308 Walnut St.
Newton Highlands 02161
Tel. 244-7020

Robert E. Brownlee, M.D.
3 Seaward Rd.
Wellesley Hills 02181
Tel. 235-6610

W. Richard Burack, M.D.
264 Beacon St., Boston 02116
Tel. 267-3360

Eugene P. Clerkin, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Donat P. Cyr, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Albert I. DeFriez, M.D.
110 Francis St., 8B
Boston 02215
Tel. 277-4402

B. Dan Ferguson, M.D.
Joslin Clinic, Boston 02215
Tel. 232-8280

Luis Fernandez-Herlihy, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Jurgen H. Fischer, M.D.
110 Francis St., GA
Boston 02215
Tel. 277-4430

Robert E. Foley, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Frank P. Foster, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

William B. Hadley, M.D.
Joslin Clinic, Boston 02215
Tel. 232-8280

Elmer E. Hinton, M.D.
110 Francis St., 2F
Boston 02215
Tel. 734-7227

Albert A. Hornor, M.D.
319 Longwood Ave.
Boston 02215
Tel. 232-3911

Frank A. Howard, M.D.
110 Francis St., 7H
Boston 02215
Tel. 734-1680

Lyman H. Hoyt, M.D.
110 Francis St., GA
Boston 02215
Tel. 277-4430

Allen P. Joslin, M.D.
Joslin Clinic, Boston 02215
Tel. 232-8280

Willis R. Keene, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Leo P. Krall, M.D.
Joslin Clinic, Boston 02215
Tel. 232-8280

Edwin J. Kroeker, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

George E. MacDonald, M.D.
110 Francis St., GA
Boston 02215
Tel. 277-3375

Joseph E. Mackie, M.D.
3 Seaward Rd.
Wellesley Hills 02181
Tel. 235-6079

Robert J. MacMillan, M.D.
319 Longwood Ave.
Boston 02215
Tel. 232-3911

Alexander Marble, M.D.
Joslin Clinic, Boston 02215
Tel. 232-8280

L. Tillman McDaniel, M.D.
110 Francis St., 9D
Boston 02215
Tel. 734-1028

Rosemary A. Murphy, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

John W. Norcross, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

A. Seymour Parker, Jr., M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Leroy E. Parkins, M.D.
50A Amory St., Brookline 02146
Tel. 536-2275

Carey M. Peters, M.D.
110 Francis St., 9D
Boston 02215
Tel. 734-0724

M. D. Phelps, Jr., M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Hugh M. Pyle, M.D.
110 Francis St., 6A
Boston 02215
Tel. 734-7880

C. Burns Roehrig, M.D.
110 Francis St., 9C
Boston 02215
Tel. 734-1180

David I. Rutledge, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

William B. Stevens, M.D.
319 Longwood Ave.
Boston 02215
Tel. 232-3911

Robert D. Sullivan, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Frank J. Takacs, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Richard W. Thaler, M.D.
264 Beacon St.Boston 02116
Tel. 261-1234

James L. Tullis, M.D.
110 Francis St., 6A
Boston 02215
Tel. 232-1210

Fred F. Whitcomb, Jr., M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Priscilla White, M.D.
Joslin Clinic, Boston 02215
Tel. 232-8280

Donna Younger, M.D.
Joslin Clinic, Boston 02215
Tel. 232-8280

Henry E. Zellmann, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Neurology:
T. Corwin Fleming, M.D.
208 Beacon St.Boston 02116
Tel. 267-2040

Simeon Locke, M.D.
110 Francis St., 9G
Boston 02215
Tel. 232-1147

Walter I. Tucker, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Henry R. Viets, M.D.
20 Chapel St.Brookline 02146
Tel. 566-3200

Psychiatry:
Robert Fleming, M.D.
208 Beacon St., Boston 02116
Tel. 267-2040

T. Corwin Fleming, M.D.
208 Beacon St., Boston 02116
Tel. 267-2040

Richard C. Lippincott, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Oscar J. Raeder, M.D.
45 Bay State Rd., Boston 02215
Tel. 267-4242

Walter I. Tucker, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Pulmonary Disease:
Theodore L. Badger, M.D.
264 Beacon St., Boston 02116
Tel. 267-3750

Albert I. DeFriez, M.D.
110 Francis St., 8B
Boston 02215
Tel. 277-4402

Edwin J. Kroeker, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Carlton R. Souders, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Rheumatoid Disease:
Luis Fernandez-Herhily, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Associate Staff

Allergy and Dermatology:
Mary O'Hara Morse, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Samuel L. Moschella, M.D.*
Lahey Clinic, Boston 02215
Tel. 536-7030

**Dermatology only*

Cardiology:
O. Stevens Leland, M.D.
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

Dermatology:
Samuel L. Moschella, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Gastroenterology:
S. Peter Gibb, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Internal Medicine:
Donald M. Barnett, M.D.
Joslin Clinic, Boston 02215
Tel. 232-8280

William P. Beetham, Jr., M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Donald J. Breslin, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Edgar S. Cathcart, M.D.
750 Harrison Ave.
Boston 02215
Tel. 262-1400

Gisella Garan, M.D.
Joslin Clinic, Boston 02215
Tel. 232-8280

Charles A. Graham, M.D.
Joslin Clinic, Boston 02215
Tel. 232-8280

Earle I. Hammer, M.D.**
454 Brookline Ave.
Boston 02215

John Hinman, M.D.
110 Francis St., 6A
Boston 02215
Tel. 232-1210

David B. Kelley, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

George P. Kozak, M.D.
Joslin Clinic, Boston 02215
Tel. 232-8280

F. William Marlow, Jr., M.D.
1180 Beacon St.
Brookline 02146
Tel. 566-8266

Richard A. Oberfield, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Artemis G. Pazianos, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Jules R. Schwaber, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Neil W. Swinton, Jr., M.D.**
Lahey Clinic, Boston 02215
***In service*

Neurology:
H. Stephen Kott, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Psychiatry:
Gerald F. Bigwood, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

John Lockhart, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Dana M. Sheldon, M.D.
345 Harvard St.
Cambridge 02139
Tel. 868-7317

Rheumatoid Disease:
Edgar S. Cathcart, M.D.
750 Harrison Ave.
Boston 02215
Tel. 262-1400

Consulting Staff

Dermatology:
Basil C. Gray, M.D.
3 Seaward Rd.
Wellesley Hills 02181
Tel. 235-4477

Neurology:
G. Colket Caner, M.D.
63 Marlborough St.
Boston 02116
Tel. 536-2727

Psychiatry:
G. Colket Caner, M.D.
63 Marlborough St.
Boston 02116
Tel. 536-2727

Phillip L. Isenberg, M.D.
119 Willard Rd.
Brookline 02146
Tel. 566-4416

Ian Paley Rak, M.D.
110 Francis St., 6G
Boston 02215
Tel. 734-6355

Internal Medicine:
Daniel Bernstein, M.D.
721 Huntington Ave.
Boston 02215
Tel. 734-8000

George F. Cahill, Jr., M.D.
Elliott P. Joslin Research Lab.
170 Pilgrim Rd., Boston 02215
Tel. 734-7670

Earle M. Chapman, M.D.
275 Charles St., Boston 02114
Tel. 523-0533

Joseph F. Dingman, M.D.
721 Huntington Ave.
Boston 02215
Tel. 734-8000

Laurence B. Ellis, M.D.
319 Longwood Ave.
Boston 02215
Tel. 232-3911

Richard P. Stetson, M.D.
V. A. Hospital, VFW Parkway
West Roxbury 02132
Tel. 323-7700

Courtesy Staff

Hematology:
Herbert S. Sise, M.D.
203 Commonwealth Ave.
Boston 02116
Tel. 536-5680

Internal Medicine:
Francis G. Barnum, Jr., M.D.
1776 Beacon St.
Brookline 02146
Tel. 277-6200

John W. Cass, Jr., M.D.
87 Chestnut St., Boston 02115
Tel. 742-1820

Jurgen Steinke, M.D.
Elliott P. Joslin Research Lab.
170 Pilgrim Rd., Boston 02215
Tel. 734-7670

Assistants in Medicine:
C. Bernard Carpenter, M.D.
Laurence Cloud, M.D.
Constantine L. Hampers, M.D.
Norman K. Hollenberg, M.D.
Stanley J. Mazurkie, M.D.

DEPARTMENT OF PATHOLOGY

Chairman
William A. Meissner, M.D.

Active Staff

Albert E. Anderson, M.D.
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

Bradley E. Copeland, M.D.
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

Merle A. Legg, M.D.
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

William A. Meissner, M.D.
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

David Skinner, M.D.
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

Shields Warren, M.D.
Cancer Research Institute
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

Associate Staff

Harry W. Carter, M.D.
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

William F. O'Toole, M.D.
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

Consulting Staff

Sidney Farber, M.D.
35 Binney St., Boston 02215
Tel. 734-6000

Olive Gates, M.D.
Cancer Research Institute
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

DEPARTMENT OF RADIOLOGY

Diagnostic Division

Chairman
Mirle A. Kellett, M.D.

Active Staff

Harry Bailey, M.D.
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

Mirle A. Kellett, M.D.
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

Associate Staff

Herbert F. Gramm, M.D.
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

Courtesy Staff

David O. Johnston, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Ferris J. Siber, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Esther Silveus, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Robert E. Wise, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Therapeutic Division

Chairman
Joseph H. Marks, M.D.

Active Staff

Joseph H. Marks, M.D.
New England Deaconess Hosp.
Boston 02215
Tel. 734-7000

Ferdinand A. Salzman, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Magnus I. Smedal, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Consulting Staff

Henry I. Kohn, M.D.
50 Binney St., Boston 02215
Tel. 734-3300

DEPARTMENT OF SURGERY

Chairman
Cornelius E. Sedgwick, M.D.

Active Staff

Anesthesia:

Ines Acuna, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Francis J. Audin, M.D.
53 Lowell Rd.
Wellesley Hills 02181
Tel. 734-7000 — 235-2444

Joseph P. Crehan, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Urban H. Eversole, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Leo V. Hand, M.D.
1501 Centre St.
Newton Highlands 02161
Tel. 734-7000 — 244-6160

Stephen Y. Klingler
Lahey Clinic, Boston 02215
Tel. 536-7030

George Mastras, M.D.
185 Pilgrim Rd., Boston 02215
Tel. 734-7000

Frederick S. McAlpine, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Morris J. Nicholson, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Robert B. Orr, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

General Surgery:
Herbert D. Adams, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Hollis L. Albright, M.D.
110 Francis St., 7F
Boston 02215
Tel. 232-1218

Thomas J. Anglem, M.D.
110 Francis St., 8C
Boston 02215
Tel. 277-8490

Ernest M. Barsamian, M.D.
1400 V.F.W. Parkway
West Roxbury
Tel. 323-7700

John W. Braasch, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

John R. Brooks, M.D.
721 Huntington Ave.
Boston 02215
Tel. 734-8000

Bentley P. Colcock, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Ernest M. Daland, M.D.
483 Beacon St., Boston 02215
Tel. 267-2907

R. Clement Darling, M.D.
1180 Beacon St.
Brookline 02146
Tel. 277-2376

Clifford C. Franseen, M.D.
110 Francis St., 9C
Boston 02215
Tel. 566-4603

Gerald G. Garcelon, M.D.
2000 Washington St.
Newton Lower Falls 02162
Tel. 527-3450

E. Parker Hayden, M.D.
249 Commonwealth Ave.
Boston 02116
Tel. 536-1325

Carl S. Hoar, Jr., M.D.
110 Francis Street, 9C
Boston 02215
Tel. 277-2463

Richard C. Kerr, M.D.
110 Francis St., 8C
Boston 02215
Tel. 277-6590

Charles C. Lund, M.D.
319 Longwood Ave.
Boston 02215
Tel. 232-3911

William V. McDermott, M.D.
818 Harrison Ave.
Boston 02118
Tel. 424-5108

John B. McKittrick, M.D.
110 Francis Street, 8E
Boston 02215
Tel. 232-2531

Leland S. McKittrick, M.D.
110 Francis St., 8E
Boston 02215
Tel. 232-6330

W. Bradford Patterson, M.D.
110 Francis St., GA
Boston 02215
Tel. 734-6560

Louis N. Pernokas, M.D.
1269 Beacon St.
Brookline 02146
Tel. 734-6438

John V. Pikula, M.D.
818 Harrison Ave.
Boston 02118
Tel. 536-2255

Theodore C. Pratt, M.D.
110 Francis St., 9B
Boston 02215
Tel. 566-8445

John L. Rowbotham, M.D.
110 Francis St., 2G
Boston 02215
Tel. 734-0105

Cornelius E. Sedgwick, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Neil W. Swinton, Sr., M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Malcolm C. Veidenheimer, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Kenneth W. Warren, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Frank C. Wheelock, Jr., M.D.
110 Francis St., 2G
Boston 02215
Tel. 566-6349

Earle W. Wilkins, Jr., M.D.
Zero Emerson Place, Charles
River Park, Boston 02114
Tel. 265-2678

Gynecology:

Edward H. Copenhaver, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Thomas H. Green, Jr., M.D.
226 Marlborough St.
Boston 02116
Tel. 267-3530

Francis M. Ingersoll, M.D.
226 Marlborough St.
Boston 02116
Tel. 267-3530

Langdon Parsons, M.D.
203 Commonwealth Ave.
Boston 02116
Tel. 267-3005

Gynecology and Obstetrics:

Bartlett H. Stone, M.D.
110 Francis St., 7K
Boston 02215
Tel. 232-3365

Neurosurgery:

H. Thomas Ballantine, Jr., M.D.
Massachusetts General Hosp.
Boston 02114
Tel. 726-2930

Charles A. Fager, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Edwin F. Lang, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

James L. Poppen, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Ophthalmology:
William P. Beetham, M.D.
108 Bay State Rd.
Boston 02215
Tel. 266-1490

John M. Hill, M.D.
108 Bay State Rd.
Boston 02215
Tel. 266-1490

Alfred W. Scott, M.D.
7 Bay State Rd., Boston 02215
Tel. 536-1890

Earl S. Seale, M.D.
126 Bay State Rd.
Boston 02215
Tel. 266-6344

Oral Surgery:
Walter C. Guralnick, D.M.D.
110 Francis St., 6F
Boston 02215
Tel. 232-6860

Richard L. Miner, D.D.S.
363 Marlborough St.
Boston 02116
Tel. 536-9040

J. Henry Stempien, D.M.D.
328 Washington St.
Wellesley Hills 02181
Tel. 237-0050

Orthopedic Surgery:
Frank D. Bates, M.D.
319 Longwood Ave.
Boston 02215
Tel. 232-3911

Willard E. Dotter, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

George Hammond, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Robert E. Leach, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Richard A. Mayo, M.D.
110 Francis St., 8A
Boston 02215
Tel. 232-0277

Robert H. Morris, M.D.
319 Longwood Ave.
Boston 02215
Tel. 232-3911

William R. Torgerson, Jr., M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Otolaryngology:
John R. Frazee, M.D.
1180 Beacon St.
Brookline 02146
Tel. 277-3300

G. David King, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Frank D. Lathrop, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Peter Oliver, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Don James Weekes, M.D.
110 Francis Street, 2A
Boston 02215
Tel. 277-7378

Plastic Surgery:
Aram Roopenian, M.D.
475 Commonwealth Ave.
Boston 02215
Tel. 536-5215

Thoracic Surgery:
Herbert D. Adams, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

James A. Bougas, M.D.
750 Harrison Ave.
Boston 02118
Tel. 262-4200

David P. Boyd, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Wilford B. Neptune, M.D.
135 Francis St., Boston 02215
Tel. 277-5592

Richard H. Overholt, M.D.
135 Francis St., Boston 02215
Tel. 277-5592

George W. B. Starkey, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

John W. Strieder, M.D.
2000 Washington St.
Newton Lower Falls 02162
Tel. 527-5616

Elton Watkins, Jr., M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Francis M. Woods, M.D.
135 Francis St., Boston 02215
Tel. 277-5592

Urology:
Harvard H. Crabtree, M.D.
110 Francis St., 9A
Boston 02215
Tel. 232-9695

Robert E. Desautels, M.D.
110 Francis St., 9E
Boston 02215
Tel. 566-0802

Vernon S. Dick, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Joseph B. Dowd, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Earl E. Ewert, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Lloyd D. Flint, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Roger C. Graves, M.D.
110 Francis St., 9E
Boston 02215
Tel. 566-0802

Lorande M. Woodruff, M.D.
110 Francis St., 9A
Boston 02215
Tel. 232-5636

Associate Staff

Anesthesiology:

Julie S. Crocker, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Peter G. Drake, M.D.
185 Pilgrim Rd., Boston 02215
Tel. 734-7000

Michael C. Gabriel, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Eliot S. Irving, M.D.
1898 Beacon St.
Brookline 02146
Tel. 566-4865

David B. Longson, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Andrew E. St. Amand, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

General Surgery:

Frederick W. Ackroyd, M.D.
110 Francis St.
Boston 02215
Tel. 232-2531

Menelaos Aliapoulios, M.D.
721 Huntington Ave.
Boston 02115
Tel. 734-8000

Blake Cady, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Keith Merrill, Jr., M.D.
110 Francis St., 8C
Boston 02215
Tel. 734-7474

William P. Scherer, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Neurosurgery:

David A. Roth, M.D.
818 Harrison Ave.
Boston 02118
Tel. 424-5104

Harold A. Wilkinson, M.D.
818 Harrison Ave.
Boston 02118
Tel. 424-5000

Obstetrics and Gynecology:

Clement Yahia, M.D.
110 Francis St., 7J
Boston 02215
Tel. 734-6523

Ophthalmology:

Lloyd M. Aiello, M.D.
108 Bay State Rd.
Boston 02215
Tel. 266-1490

Arthur F. Calnan, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Orthopedic Surgery:
Gordon F. Lupien, M.D.
110 Francis St., 8A
Boston 02215
Tel. 232-0277

Otolaryngology:
Clarence E. Kylander, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Daniel Miller, M.D.
110 Francis St., GB
Boston 02215
Tel. 232-3433

Plastic Surgery:
George H. Gifford, Jr., M.D.
300 Longwood Ave.
Boston 02215
Tel. 734-6000

Joseph E. Murray, M.D.
721 Huntington Ave.
Boston 02115
Tel. 734-8000

Thoracic Surgery:
Mian M. Ashraf, M.D.
135 Francis St., Boston 02215
Tel. 277-5592

Urology:
Leonard Zinman, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Consulting Staff

General Surgery:
Lewis L. Haynes, M.D.
Lahey Clinic, Boston 02215
Tel. 536-7030

Francis D. Moore, M.D.
721 Huntington Ave.
Boston 02115
Tel. 734-8000

William P. Rogers, Jr., M.D.
275 Charles St., Boston 02114
Tel. 532-3812

Lamar Soutter, M.D.
577 Bridge St., Dedham
Tel. 326-1360

Neurosurgery:
William Sweet, M.D.
Massachusetts General Hosp.
Boston 02114
Tel. 726-2925

Obstetrics:
Luke Gillespie, M.D.
221 Longwood Ave.
Boston 02215
Tel. 734-5300

Duncan E. Reid, M.D.
221 Longwood Ave.
Boston 02215
Tel. 566-5142

Orthopedic Surgery:
Eugene E. Record, M.D.
275 Charles St.
Boston 02114
Tel. 523-7278

Urology:
Wyland F. Leadbetter, M.D.
Massachusetts General Hosp.
Boston 02114
Tel. 523-5250

Courtesy Staff

General Surgery:
F. Thomas Gephart, M.D.
275 Charles St., Boston 02114
Tel. 523-4922

Paul F. Gryska, M.D.
2000 Washington St.
Newton Lower Falls 02162
Tel. 969-6471

Carroll C. Miller, M.D.
304 Humphrey St., Swampscott
Tel. 593-3991

Melvin P. Osborne, M.D.
1153 Centre St.
Jamaica Plain 02130
Tel. 522-5800

John W. Spellman, M.D.
110 Francis St., 7B
Boston 02215
Tel. 277-2328

Gynecology:
Paul A. Younge, M.D.
1101 Beacon St.
Brookline 02146
Tel. 277-9498

Neurosurgery:
John S. Hodgson, M.D.
13 Jefferson Rd.
Chestnut Hill 02167

Raymond N. Kjellberg, M.D.
Massachusetts General Hosp.
Boston 02114
Tel. 726-2933

Oral Surgery:
Harry W. Harding, D.M.D.
60 Charlesgate West
Boston 02115
Tel. 536-3350

Orthopedic Surgery:
Albert H. Brewster, M.D.
234 Marlborough St.
Boston 02116
Tel. 266-3670

Plastic Surgery:
Bradford Cannon, M.D.
275 Charles St., Boston 02114
Tel. 523-2498

Urology:
Sylvester B. Kelley, M.D.
412 Beacon St., Boston 02116
Tel. 536-3750

Podiatry:
Richard S. Cotton, D.S.C.
110 Francis St., 2D
Boston 02215
Tel. 277-2150

Donald C. Helms, D.S.C.
110 Francis St., 7D
Boston 02215
Tel. 734-0310

Rob Roy McGregor, D.S.C.
110 Francis St., 7D
Boston 02215
Tel. 232-5022

CANCER RESEARCH INSTITUTE

Director:
Shields Warren, M.D.

Scientific Advisory Board:
Robley D. Evans, Ph.D.
Sidney Farber, M.D.
A. Baird Hastings, Ph.D.

Senior Associates:
Russell F. Cowing
Gilbert H. Friedell, M.D.
Olive Gates, M.D.
Olga Greengard, Ph.D.
Thomas C. Jones, D.V.M.
W. Eugene Knox, M.D.
Hermann Lisco, M.D.
Constantine J. Maletskos, Ph.D.

Associates:
Spencer Burney, M.D.
Harry W. Carter
Annemarie Herzfeld, Ph.D.
Maria L. Horowitz, Ph.D.
George Kury, M.D.
Lea Reshef, M.D.
Chakravarthi Sharma, Ph.D.
Richard Siegler, M.D.

Fellows:
Livia H. Rev-Kury, M.D.
Enrique Soto, M.D.
Chung-Wai Tang, M.D.

BLOOD RESEARCH INSTITUTE

Francis A. Breen, Jr., M.D.
John G. Gibson, II, M.D.
John Hinman, M.D.
Hugh M. Pyle, M.D.
Robert J. Tinch, Sr., M.S.
James L. Tullis, M.D.

ELLIOTT P. JOSLIN RESEARCH LABORATORY

Director:
George F. Cahill, Jr., M.D.

Associates:
Marios C. Balodimos, M.D.
Bernard I. Chazan, M.D.
Arthur A. Like, M.D.
William J. Reddy, Ph.D.
Eleazar Shafrir, M.D.
J. Stuart Soeldner, M.D.
Edmund Sonnenblick, M.D.
Robert G. Spiro, M.D.
Jurgen Steinke, M.D.

Fellows:
Paul J. Beisswenger, M.D.
William Chick, M.D.
Robert J. Craig, M.D.
Donald Feldman, M.D.
Philip Felig, M.D.
G. L. A. From, M.D.
Ray E. Gleason, Ph.D.
Marise S. Gottlieb, M.D.
Margot Hamilton, M.D.
Andrew Henderson, M.D.
M. Guillermo Herrera, M.D.
Takehiko Ide, M.D.
Paul J. LaRaia, M.D.
Oliver E. Owen, M.D.
William Parmley
Thomas Pozefsky
Leonor Rojas, M.D.
Neil B. Ruderman, M.D.
Peter Sonksen, M.D.
Mary Jane Spiro, Ph.D.
Allen Stam, M.D.
Jordan Tobin, M.D.
Charles Urshel, M.D.
Robert F. Williams, M.D.

Contents

Report of the President
Report of the Executive Vice President
Report of the Medical Administrative Board
Report of the Department of Medicine
Report of the Department of Surgery
Report of the Department of Pathology
Report of the Department of Radiotherapy
Report of the Department of Diagnostic Radiology
Report of the Friends of Deaconess
New England Deaconess Complex

Report of the President

Laurens MacLure
President

In a speech given in Boston recently, a prominent hospital trustee and businessman stated that hospitals are in the spotlight and, as a result, hospitals are on the spot. He was right on both counts. The rising costs of hospital care plus the new roles being played by our federal and state governments as a result of Medicare and Medicaid have focused a great deal of attention on our system of health services and care. Those of us connected with the Deaconess are not only concerned with the problems but responsible for the answers, and we should be asking what is the Deaconess doing to provide better care to more patients at a reasonable cost. The reason that the Deaconess exists is to provide superior patient care at a reasonable cost. In my report this

year, I should like to relate what we have done during the past twelve months and what we are planning to do in the future to meet these twin objectives.

As you know, after considerable study and planning, we announced last January an $8.5 million Development Program designed to add six floors to the Central Building. This plan includes approximately 240 new private and semi-private patient accommodations, the expansion of our X-ray department, recovery rooms and special care units.

To implement these plans we launched a $3 million public subscription campaign with the balance to be provided from available endowment funds, government assistance and private financing. While I had hoped to be able to announce at this time that we have reached our goal, I can say that we are within reach of our objective. At this time, we have raised $2,740,000 or 91.4% of our $3 million target. Having come this far, I am confident we can raise the balance needed before we sign the construction contract early next year.

Our financing was arranged last spring and earlier this month we received word that the proposed addition would qualify for maximum government assistance under the Hill-Burton Act.

While a great deal of effort has been devoted to our development program during the past year, equal amounts of time and energy have been devoted to the organization and operation of our Hospital.

Recognizing the need to plan for the additional bed capacity and the larger staff which will be required upon completion of the Central Building addition, we retained an outside consultant to review our administrative organization. Out of his recommendations came a reorganization in September whereby the position of Executive Vice President was established with the important responsibilities for long-range planning, development, medical staff liaison and external communication. Also, the new position of Director with the primary responsibility of daily hospital operations was set up. By separating the key areas of planning and operations, we have strengthened our administrative organization and will be better able to meet the increasing demands which will be placed on our Hospital in the future.

In the area of nursing care, a committee which has been studying the future of our School of Nursing reported its findings and recommendations in September. This committee recommended that in view of the increasing shortage of nurses and the rising demands being placed on hospitals, our School should be strengthened and continued. The trustees approved this report and the recommendations are in the process of being implemented.

For many years the Deaconess has offered several residency programs, which have provided excellent training for the doctors as well as better care for our patients. This fall we added an internship program to our medical education program.

This has been an active and exciting year with many significant accomplishments. However, a number of important challenges lie ahead.

- We must complete our plans for more adequate housing for our nurses, house officers and staff.
- We must continue working toward the development of extended care facilities for patients who no longer need acute hospital beds but are not well enough to return to their homes.
- We must successfully complete our fund raising activities and start construction of additional patient care facilities.
- And, above all, we must continue to plan for the future in order that the Deaconess will continue to provide the best in medicine and, therefore, in patient care.

This report would not be complete without mention of our wonderful staff — the doctors, nurses, laboratory technicians and all the others, seen and unseen, whose dedicated efforts combine to provide a superior brand of patient care. A word of special thanks goes to our Executive Vice President and his staff for the outstanding job they are doing.

Report of the Executive Vice President

E. D. Lowry
Executive Vice President

Entering the elevators in the Central Building has been a challenge for me since the day they were put into operation. A challenge — and in a sense a promise, too. For, although the building is five stories high, the controls were installed for twice that number. Even then the need for additional patient floors was apparent. The job we started in the 1950's was incomplete. Today, the wheels are already in motion to complete that phase of our growth — and already new challenges for the future are taking shape.

In the intervening years many developments have taken place which have caused us to change our plans even for the current phase. When construction starts a few months from now, it will be for an additional six new floors, not the originally projected five. The additional floor is necessary for enlarged intensive care and cardiac monitoring units. Both of these save lives, and both require specially trained personnel; neither even existed a few years ago.

But we must not sit back in satisfaction over progress. The future will bring untold and almost unbelievable new techniques of medical care, new concepts of hospital responsibility, new opportunities for service. Truly this is a time of change and of growth. Never before has the operation of a hospital been more complex, more expensive, more challenging. The tremendous expansion of both scientific knowledge and of population, and the rapidly changing role of the hospital all contribute to both the cost and the challenge.

Concomitant to this, there is a startling increase in the number of paramedical professions whose skills complement and enhance those of the physician. Because of the vast amount of knowledge gained in recent years, it is no longer possible for a single pathologist to be an expert in every area of the laboratories. Even here we must have specialization. The same holds true for the radiologist, the internist and the surgeon. As each new specialty, or subspecialty, emerges, new paramedical training is needed; and for many of these specialties training facilities are nonexistent at present. As the need develops, courses must be designed and implemented and personnel must be recruited for this training. Once trained, these new paramedical specialists are in high demand and the competition for their services becomes another important factor. Only a small percentage of hospitals has the ability to provide training; nearly all hospitals need the services of these trainees.

These and other competitive pressures play an important part in increasing hospital costs . . . yet meeting these pressures is imperative if we are to continue our high standards of patient care. Certainly we must pay an adequate salary to nurses and other highly trained employees; just as certainly we must establish a realistic minimum wage for service and maintenance employees. These are mandatory, not only for us to continue to offer the same high level of patient care as we have in the past, but also

to keep pace with life-giving advances in medical technology. Discoveries in the research laboratories must be applied to clinical medicine; otherwise they are relatively valueless. It is the patient who must benefit. Better health and longer life are the primary results; increasing costs must be given secondary consideration.

I am sure that in the future, this past year will be referred to as the year Medicare began. Some people tend to attribute rising hospital costs to the overall impact of Medicare; the facts do not seem to me to bear this out. Despite the ominous predictions of great increase in the number of patients who would be awaiting admission to our hospitals, and of the many other complications and problems we would face, the overall effect of Medicare has been minor in our hospital. We were taxed to capacity as we have been for many years and as we will continue for at least two more years, but this was due to normal growth, not Medicare.

The Deaconess Building has outlived its usefulness as a patient building, but it cannot be retired until the first phase of our building program is completed. Plans and specifications for the addition are nearly completed, and we expect to ask for bids early in December. They are to be returned in January, and construction should start a few weeks later, with completion scheduled for early 1970.

During this same period additional housing for personnel must be planned and constructed. A consulting firm has been retained and is working on a comprehensive study of housing needs, and their report is expected shortly.

In order to minimize the loss of beds due to construction, plans are under way to relocate all of the nursing offices on the second floor of Baker. The second floor of Palmer will then be remodeled into a patient floor comparable to the floors above. Hopefully, this will enable us to maintain our present complement of beds.

During the past year, a new cardiac monitoring unit was installed; a new observation unit established; and major renovations of our main kitchen were completed. These renovations were all part of phase one of our building program.

Approximately 90 per cent of our capital funds campaign goal of $3 million had been subscribed at the end of this fiscal year. The campaign required hard work on the part of many, and while the job is not yet completed, I have confidence that our goal will be met. While we are grateful to every contributor, large or small, a special tribute must be given to employees of the hospital. Given a goal of $100,000, they have pledged over $225,000 to date. We believe this record is unmatched in any similar campaign in the country.

In May we welcomed Mr. Maurice Fremont-Smith, Jr. as our Director of Development. Space does not permit enumerating all of the other changes and decisions that have taken place; however, one major decision deserves special attention. The cost of maintaining our School of Nursing and the problems of recruiting qualified students and an adequate faculty have long been of deep concern. Approximately two years ago, Dr. Roger C. Graves, Chairman of the Nursing School Advisory Committee, appointed a subcommittee to study in depth the future of our school. Under the chairmanship of Dr. James W. Kelley, a member of the corporation and a representative of higher education, the subcommittee includes Miss Ellen Howland, Miss Gracia Halladay, Dr. C. Burns Roehrig, and R. D. Lowry. In brief, the report recommended that our School of Nursing be continued, and set forth specific goals for accomplishment over the next five years. The committee approved the report and because of the importance of the subject, a special meeting of the Board of Trustees was called. The trustees in turn unanimously approved the report. Our School of Nursing is to be continued even though we know that its cost will continue to increase. Ten per cent of our nation's hospitals maintain diploma schools of nursing supplying approximately 75 per cent of all nurses. All face mounting costs. It seems imperative that financial assistance come from outside sources, and it is our belief that these sources will be found.

Those of us in Administration have spent many long and soul-searching hours studying the problems of establishing new departments, of meeting the ever-increasing costs, and in developing recommendations to the trustees on salaries of personnel. We are deeply grateful to the officers, the Budget Committee, and the members of the Executive Committee for their outstanding cooperation and guidance. As our hospital continues to grow in complexity, it is no longer possible for each trustee to be fully informed on every facet of the hospital's operation. However, trustee guidance in numerous areas is needed more than ever before. New advisory committees of trustees are being appointed by our president, Mr. Laurens MacLure, each charged with the responsibility of becoming in-depth experts in certain specific areas. We need and will welcome the advice of these committees, and of any trustee or member of the corporation. Administration has been reorganized, and now that Mr. Richard E. Lee is the Director of the hospital, I will have more time for areas which require immediate attention — areas which involve trustees, members of the medical staff, and everyone who is interested in our hospital. For all that they have contributed in the past, and all that I know they will contribute in the future, my heartfelt thanks go to Mr. Richard E. Lee, Miss Ellen D. Howland, Miss Ellen Adams, Mr. Theodore F. Koch, Mr. Hubert D. Sycamore, and to each department head and employee of the hospital. Each individual has special talents which have helped make the Deaconess Hospital respected in medical circles. I know of no hospital that has a better spirit, or evidence of closer teamwork. Even though our hospital will continue to grow in size and complexity, I am confident this spirit can be maintained.

Report of the Medical Administrative Board

Alexander Marble, M.D., President

Herbert D. Adams, M.D., Vice President

Elmer C. Bartels, M.D.
Robert F. Bradley, Jr., M.D.
Robert E. Brownlee, M.D.
Carl S. Hoar, Jr., M.D.
Allen P. Joslin, M.D.
Mirle A. Kellett, M.D.
Joseph H. Marks, M.D.
William A. Meissner, M.D.
Cornelius E. Sedgwick, M.D.
James L. Tullis, M.D.

R. D. Lowry, Secretary

The Medical Administrative Board is the mechanism by which our large medical staff furnishes advice and direction for professional matters of concern to the Hospital. Its membership includes representatives of practicing groups of the staff, the Chairmen of the Departments of Medicine, Surgery, Radiology and Pathology and the Executive Vice President of the Hospital, ex officio. The detailed consideration of both routine and special professional matters is made by committees, many of which meet monthly to make recommendations to the Medical Administrative Board. This year 86 staff members served on one or more of 22 committees. Two representatives of the Medical Administrative Board meet as guests with the Executive Committee of the Board of Trustees each month and it is to this Committee that recommendations are made which involve staff appointments and matters of administrative nature. At times the system may seem cumbersome or time-consuming, but it has the advantage of maintaining democratic administration and of securing the best thinking and effort of many highly skilled persons.

In my report last year I called attention to the familiar triad of hospital functions: patient care, teaching and research. During the past year much was accomplished along each line. The quality of patient care, traditionally high and personalized, has been maintained and extended by the hard work and competence of physicians, nurses, dietitians, laboratory workers and other professional and administrative personnel. The patient has benefited by specialized care and treatment, made possible by such facilities as the Coronary Care and Intensive Care Units, Hospital Teaching Unit, Stoma Rehabilitation Clinic, Recovery Room, Respiratory Therapy and Equipment Service, Tumor Clinic, Cardiopulmonary Unit and Observation Unit. The principle of segregating patients according to the type and amount of nursing care needed is a sound one; and the only workable plan for the future if we are to use facilities and personnel to the fullest extent and in the best way.

An increasing amount of teaching is carried on at the Deaconess. The program of training resident physicians and fellows is a well-established one; and this year an internship in medicine was begun. Some teaching of medical students, either singly or in small groups, goes on. Many believe that a close affiliation with a medical school or schools is essential for continued growth and excellence of the Hospital.

For many years the Deaconess has been a center for postgraduate medical education. Various courses and conferences for physicians have been conducted this year by members of the staff under either group, clinic, society or medical school auspices. No week goes by without the visits of physicians from all parts of the world. In addition to intramural activities, members of the medical staff take an active part in teaching at local, state, national and international meetings.

Research is vital to the life and continued growth of any hospital. During the year a Cancer Training Program was started with U.S. Public Health Service funds. Research continues in facilities either owned by the Hospital or closely related to it geographically, including the Cancer Research Institute, the Blood Research Institute (formerly the Protein Foundation), the Elliott P. Joslin Research Laboratory and Shields Warren Radiation Laboratory. The combined efforts of these laboratories contribute greatly to the high standing and reputation of the Deaconess Hospital in the medical and scientific world.

The year has brought its problems with the growing pains of the residency and intern programs, the impact of Medicare and the increase in the number of older patients with difficult medical situations, the rise in hospital costs to levels unbelievable a decade or two ago and the perennial shortage of beds. The problems and achievements are considered in the accompanying reports from the chairmen of the departments. The difficulties have been handled in a satisfactory manner, thousands of patients have received excellent medical care, much teaching of diverse types has been done and a great deal of sound research advances have been made.

The Medical Staff is especially pleased at the success of the program to enlarge the Central Building, which will add about 100 desperately needed beds. Regrettably a number of years elapse from the time one starts to plan for a new building to the day when patients can actually occupy the rooms. Everyone realizes the necessity of going ahead as soon as possible with a further expansion program, which would replace the original Deaconess Building with a large modern structure. This should provide not only for a large number of beds for patients requiring varying degrees of nursing care, but also for more out-patient facilities, a more accessible auditorium and other class and conference rooms. Members of the Medical Staff will continue to work enthusiastically for the continued development of the New England Deaconess Hospital.

Report of the Department of Medicine

James L. Tullis, M.D.
Chairman

Several important advances have been made this year. The motivation behind each has been a continuing desire to provide the staff with optimal facilities and support for the unexcelled patient care which characterizes our Hospital. The changes have encompassed three areas of departmental function: patient care, the teaching program and research.

Patient Care

A Coronary Care Unit opened in November, 1966, where any patient with irregular heart action can be monitored during the critical period after the onset of his illness, and where appropriate prophylactic measures can be instituted promptly. In the first eleven months 165 patients were admitted to the Unit. The average daily census was 2.6 patients and the average stay was 3.8 days. Both patients and staff have been impressed with the excellent nursing, house staff and attending supervision which have been possible. Although special training and equipment have been provided for resuscitation, it is a constant goal to avoid such measures by monitoring the patients so closely that preventive measures can be instituted successfully.

This Unit, as well as the Cardiopulmonary Unit and the electrocardiography stations, are under the direction of Dr. O. Stevens Leland. The excellent service, which this division has rendered, has been repeatedly noted. The Cardiopulmonary Unit moved to its present location on the fifth floor of the Central Building slightly over a year ago. It has contributed to patient safety and comfort by allowing completion of difficult and important procedures in a far shorter time and with greater accuracy than was possible before. During 1967 a significant increase occurred in cardiac catheterizations, angiographic procedures, cardioversions, pulmonary function tests and electrocardiographic interpretation, clearly reflecting the increased usefulness of this facility to the entire staff.

The Observation Unit was opened in September, 1967, on the second floor of the Deaconess Building with internal egress to the services of the Hospital and external egress to Pilgrim Road. Although a need for this type of a unit has been repeatedly felt, the final impetus that led to its establishment was fulfillment of certification requirements for house staff training. This new facility already gives promise of strengthening the staff's ability to render total care to its patients. It is not planned that the Unit ever should become a standard accident room for the care of trauma and emergent problems of the community. Such services are adequately provided nearby. Rather, the staff is better organized to provide specialized care to its own patients, when a short period of observation may make it possible to render definitive care without hospitalization.

Teaching Program

The most important advance in the teaching program this year has been the institution of an approved intern program in medicine. The need for the program arose partly from a desire to eliminate from the residency program those duties which more properly comprise intern experience, and from a need for a cadre of trainees from which the Hospital can draw for residency appointments. The cost in time and money of any teaching program can be justified only by making certain it results in better patient care. Some apparent advantages are night and weekend coverage of the Hospital by skilled personnel, and the constant monitoring and supervision of the Coronary and Intensive Care Units. The constant stimulation provided by a provocative group of young doctors inquiring into methods of diagnosis and treatment is a more subtle, but equally important benefit.

A new teaching program in cancer was also added this year. This program, supported by the National Institutes of Health, provides a mechanism for increasing interdisciplinary teaching among the different Hospital departments. The Department of Medicine contributed during the year to "continuing education" for practicing physicians of the community and sponsored, jointly with Harvard University, a teaching seminar for the American Academy of General Practitioners.

Research

The clinical research carried out during the past year by individual staff physicians reveals an increased number and breadth of interests. Fourteen protocols were submitted to the Advisory Committee on Clinical Investigation ranging from the use of lithium in mental disorders to investigations on the effect of diuretic drugs on blood glucose. Basic research has continued to be sponsored primarily by the institutes and groups which operate within the Hospital buildings, but which are financed and directed from outside. These include the Elliott P. Joslin Research Laboratories, the Lahey Clinic Foundation, the Blood Research Institute (formerly Protein Foundation), Cancer Research Institute and the Shields Warren Radiation Laboratory. As we move forward together, the medical staff looks with excitement at the new vistas which lie ahead for their patients.

Report of the Department of Surgery

Cornelius E. Sedgwick, M.D.
Chairman

In my first report one year ago as Chairman of the Department of Surgery I emphasized our responsibility and goal of not only maintaining the best possible surgical care of our patients, but also introducing methods and concepts of forming a teaching surgical service at both the graduate and the undergraduate levels. One actually complements the other. The better patient care, the better teaching. Our surgical residents rotate to us from the Harvard Surgical Service of the Boston City Hospital giving us a medical school affiliation. This is important as in the future all surgical residency training programs will probably be required to have some university affiliation for approval by the American Board of Surgery. To strengthen this relationship with Harvard Medical School, we now accept six third-year medical students for training in differential diagnosis. The type of unusual surgical cases in this Hospital and the ability of our surgeons to teach well make this activity a worthwhile contribution to the medical curriculum. Furthermore, if we are successful at this level of training, it will strengthen our internship residency programs.

We are in the process of reorganizing our cardiovascular thoracic residency program. This service will combine the Overholt thoracic group, the Lahey Clinic and General Staff chest surgeons, and the Harvard Division of the Boston City Hospital. It will give thoracic experience to the junior men rotating from general surgery as well as complete training for those desiring to specialize in cardiac and pulmonary surgery.

Although we have separate departments of Medicine, Surgery, Pathology and Radiology, many times we are involved with the same patients. Many new services and additions to patient care are not strictly surgical or medical, but a combined effort of all departments as well as Hospital administration. Some of our group efforts include the following:

The Teaching Service, which is the heart of our residency and internship program. It is a year old and still small. A larger number of patients must be referred by the staff in order to further our development.

The Observation Unit, a long needed service for our patients, staff and residents.

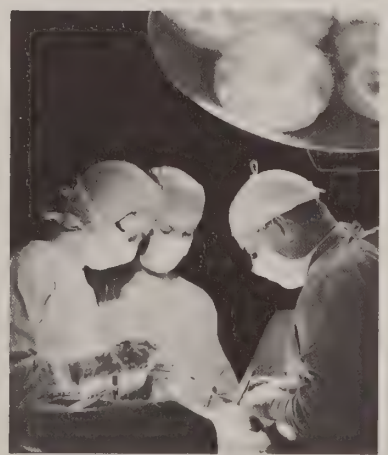
The Stoma Rehabilitation Clinic, which is the only one of its kind in the country. It was organized by Dr. John L. Rowbotham, aided by funds from the Federal Vocational Rehabilitation Administration of the Department of Health, Education and Welfare. This clinic accepts patients from any physician or surgeon in New England. Its object is to instruct patients with ileostomies, colostomies or ileal bladders how to live with their stoma. The clinic is not only concerned with the care of the stoma and the use of various appliances, but also with psychiatric and social adjustment of the patient. The value of the clinic also lies in its contribution to teaching nurses, technicians and the house staff.

The Cancer Training Unit, directed by Dr. W. Bradford Patterson, who is assisted by Dr. Laurence P. Cloud and Dr. Blake Cady. This group directs the Tumor Conference and the Tumor Clinic; they demonstrate and lecture to the house staff, and provide graduate training to outlying hospitals by sending staff members to run other tumor clinics and conferences.

The Outpatient Tumor Consultation Clinic, which provides joint evaluation of the patient by the physician, surgeon and radiologist with residents in attendance.

The Respiratory Therapy and Equipment Service, which is directed by Dr. Joseph P. Crehan. It is one of the outstanding units of this type in the country. New equipment and techniques are continually being added and changed, decreasing surgical morbidity and mortality.

Efficiency in the Operating Room, which is being improved. I strongly feel that our operating room and recovery room are the best in the country under the direction of Miss Ruth A. Pendleton. A recent survey revealed our cost is considerably higher than neighboring hospitals. By careful planning, we have changed the utilization of the operating room from 45 percent to 65 percent, which we hope will reduce the cost of this expensive suite without altering the quality of care. The staff is well aware of the rising cost of medical care and has been most cooperative in this venture.



Report of the Department of Pathology

William A. Meissner, M.D.
Chairman

The basic and inclusive task of the laboratories is to provide an increasingly diverse and complex range of laboratory procedures for patient care. Such procedures establish diagnoses, help control treatment and evaluate recovery and follow-up periods.

Our major addition during the year is the latest apparatus for organ scanning by radioactive isotopes. The brain, liver, lungs, spleen and bones now can be examined for tumors or other disease processes using specific radioactive substances. This new technique carried out in cooperation with the Department of Diagnostic Radiology has been enthusiastically received.

A new blood gas laboratory, which is located close to the surgical operating room for availability during cardiac surgery, has also been placed conveniently by the Cardiopulmonary Unit, so that samples taken during cardiac catheterization can be analyzed as soon as they are removed from the patient.

Since the volume of laboratory tests continually increases even without an increase in the number of Hospital beds, the Hospital expansion becomes even more challenging from the point of view of providing good laboratory service *seven* days a week. With the average annual increase in volume plus anticipated work due to the additional beds, our number of procedures will double within three years. Automated tests already are being used extensively and the laboratory staff is carefully evaluating plans for utilizing computers.

The involvement of the laboratories in medical education includes programs for medical technologists, cytotechnologists, medical students, residents and practicing physicians. The programs contribute to better care both within the Hospital and the community. The most vital and long-term program is residency training in anatomic and clinical pathology. This experience at the New England Deaconess Hospital provides stimulating training to eleven carefully chosen young physicians. The newest formal training program is the Boston School of Cytotechnology run in cooperation with five other Boston hospitals and Northeastern University.

We conducted two parasitology workshops for pathologists and medical technologists from every section of Massachusetts. One was held in conjunction with the annual meeting of the Massachusetts Medical Society and attracted 20 physicians, including one going to India and another going to Vietnam.

Our laboratories continued to serve as a referee for the National Comprehensive Survey of the College of American Pathologists, and as the World Health Organization reference laboratory for two committees on classification of cancer.

During the year Dr. Harold B. Kenton retired after 25 years as director of the Blood Bank with the best wishes of the laboratory staff.

Radioisotope scan of the lateral aspect of the lung.

Report of the Department of Radiotherapy

Joseph H. Marks, M.D.
Chairman

The statistics for the department of radiotherapy show that the number of X-ray treatments is similar to that of the year before. The number of radium treatments is larger than for any year since 1960. The reason for this increase is not clear since it follows a year when the lowest total was recorded. The recent variation in annual totals probably is not the result of any trend in hospital population or in staff interest.

A trend which has been of interest in the field of radiotherapy during recent years is toward smaller daily doses administered over longer periods of time. This longer, but slower, series of treatments affords an opportunity for better repair of uninvolved tissues and thus a somewhat better state of general health. An even more striking variation of this same attempt to foster repair of normal tissues is found in actual interruption of the treatment series. This interruption or vacation is usually for about two weeks in a series which might otherwise occupy five or six weeks. It appears to be of greatest value in the patient whose general condition is only fair, but whose disease is one which requires a very large dose or perhaps treatment to a large area. These factors are operative at the age of the majority of patients having malignant disease but are even more clearly evident in the elderly patient. The patient returns from his or her holiday with definite improvement in general condition and objective evidence of this improvement is frequently shown in better blood counts and other laboratory tests.

Report of the Department of Diagnostic Radiology

Mirle A. Kellett, M.D.
Chairman

The Department of Diagnostic Radiology in conjunction with the Department of Pathology is now offering a new diagnostic method for the detection of many different diseases. A dual probe radioactive isotope scanner has been in service for six months. Two hundred patients have already been studied. The scanner works on the principle that various radioactive isotopes have a specificity for certain organs of the body. The appropriate isotope is administered in minute amounts which give off small, but measurable quantities of radioactivity. By scanning the appropriate area of the body, a graphic record can be made. This consists of rows of small squares varying from white to black. The blackness of the squares is related to the intensity of radioactivity in that particular area. Many different organs or systems can be studied with this technique. Most commonly being scanned are the brain for tumor or hemorrhage, the thyroid for tumor nodules, the lungs for pulmonary emboli and the liver for tumors.

Our mammography program, first announced by Dr. Joseph H. Marks in the 1962 Annual Report, is now being expanded. This method of detecting breast tumors has been sponsored by the United States Public Health Service. With funds made available by them we are exploring the feasibility of becoming a training center for both radiologists and technicians in the New England area.

Microfilming of old X-rays was mentioned last year as a possible solution to the voluminous and costly space requirements for storage. We have just completed microfilming X-rays from the years 1957 through 1960. The films, which originally required about 600 square feet for storage, are now conveniently and compactly stored in a standard size file cabinet, located in the reading room for ready availability. This is a continuing project and will be carried out on a biennial basis.

The opacification of blood vessels is the most rapidly developing technique in diagnostic radiology. To keep pace with newer procedures we are again planning to upgrade the equipment in our special procedure room. The addition of an image intensifier and television will allow us to accurately place a catheter in any major blood vessel of the body. This will open up a whole new realm of diagnostic possibilities.

The number of diagnostic examinations is unchanged from the previous year; but the type of work is more difficult and time-consuming. We have now lived through a full year of medicare and find that it is definitely changing the character of the Hospital population. We have more elderly and debilitated patients to care for. It takes longer to examine each patient, more repeat films are required and more personnel are needed to serve each individual patient. Our existing facilities are beginning to be taxed; and we are looking forward to the new Central Building addition, which will give us three more diagnostic units.

The next area to occupy our attention will be the office area and our ability to get the reports of the examinations on the patients' charts as rapidly as possible. Automatic typing from a prerecorded tape offers exciting possibilities in this area. It could increase our efficiency severalfold and will be investigated as both a labor and cost-saving method.

Members of the Corporation

Herbert D. Adams, M.D.
Sherman Adams
Edward F. Allen
Mrs. William H. Ames
O. Kelley Anderson
F. William Andres
Kent Andrews
Harold W. Atkinson
Mrs. Alfred H. Avery
Joseph H. Bacheller, Jr.
Herbert J. Bailey
John A. Bailey
Newton S. Baker
John Barnard
John Barnard, Jr.
Lewis H. Beckford
Warren S. Berg
Lester L. Boobar
Ralph Bradley
Edwin A. Brewer
F. Gorham Brigham, Jr.
William G. Brooks
Stanley L. Brown
Theodore L. Buell
Frank W. Buxton
Horace T. Cahill
Francis W. Capper
Manson H. Carter
Harold C. Case
Paul F. Clark
Vincent P. Clarke
Edward H. E. Cooley
W. Walker Cowles
Harold H. Cramer
Charles C. Cunningham, Jr.
Lewis G. Curtis
Robert W. Custance
Adna J. Cutting
Edward Dana
Edward Dane
E. Merrill Darling
Casimir deRham, Jr.
George G. Dike
Arland A. Dirlam
Arthur T. Dooley
Paul A. Draper
John M. Dry
Richard D. Drysdale
John Ainsworth Dunn
William Elfers
Carl S. Ell
H. Bigelow Emerson
John David Erb
James F. Farr
Hugh R. Farrington
Robert Fawcett
Thacher H. Fisk
James Fraggos
Herman T. Gammons
Hollis G. Gerrish
Hamilton M. Gifford
C. Homer Ginns
Curt Gowdy
Jesse S. Greene
Lawrence H. Hansel
Maynard L. Harris
H. Rushton Harwood, Jr.
Charles W. Havice
H. Daniel Hawver
Henry E. Helms
Elliott Henderson
Colby Hewitt, Jr.
Chester A. Higley
John Hill

Charles E. Hilliard
Charles H. Hood
A. Thomas Huffman
William D. Ireland
Herbert H. Jaynes
Robert M. Jenney
Ernest S. Johnson
Gordon N. Johnson, M.D.
Leslie H. Johnson
Durham F. Jones
Mrs. Harry L. Jones
Oscar B. Keith
James W. Kelley
William T. King
Elisha F. Lee
Mrs. Halfdan Lee
Andrew J. Lord, Jr.
John Wesley Lord
Mrs. John Wesley Lord
Lemuel K. Lord
Ralph Lowell
Robert D. Lowry
Stephen C. Luce, Jr.
Andrews S. Macalaster
Laurens MacLure
Mrs. Stanley MacMullen
John F. Manter
Alexander Marble, M.D.
Daniel L. Marsh
Miss Mabel Marsh
Morrill O. Martin
James K. Mathews
Donald H. McAninch
Paul K. McElroy
Frank M. McGowan
Leland S. McKittrick, M.D.
John H. Meyer
Philip I. Milliken
Robert H. Montgomery
Wandell W. Mooney
Lewis H. Moulton
James T. Mountz
Victor P. Musk
Rodger P. Nordblom
William J. Ogle
Bruce S. Old
Vernon D. O'Neill
Thomas A. Pappas
Miss Amelia Peabody
Endicott Peabody
Lester C. Peabody
Charles O. Pengra
Joseph Earl Perry
Walter H. Phillips
Sumner T. Pike
Joseph H. Pikul
John E. Post
Albert Pratt
William M. Rand
John B. Reid
Lockhart B. Rogers
Charles E. Rogerson
Henry S. Rogerson
George I. Rohrbough
*Howard F. Root, M.D.
James M. Rothwell
Charles F. Rowley
Edward G. Rudd
C. Clifford Sargent
William A. Schan
Miss Dorothy B. Seccomb
G. Vaughn Shedd
Chester D. Shepherd
Charles M. Shriner
Charles E. Smith
Everett Ware Smith
H. Travers Smith
John Snook, Jr.
William B. Snow
Stephen Sonnabend
Joseph P. Spang, Jr.
Berton Steir
Earl P. Stevenson
Humphrey H. Swift
Robert P. Tibolt
Miss Clara F. Trowbridge
William B. Tyler
James Uhlinger
Henry T. Vance
C. Vincent Vappi
Donald W. Vose
H. Hughes Wagner
Mrs. Sheldon E. Wardwell
Kenneth W. Warren, M.D.
Shields Warren, M.D.
Guy H. Wayne
Parker Webb
*Henry W. Webster
Sinclair Weeks
William D. Weeks
Charles P. Whitlock
John A. Whittemore, Jr.
Wilbar Whittemore
Oskar W. Wikstrom
Floyd S. Wilson
J. Wendell Yeo
Elmo F. Young
Henry C. Young
John D. Young
Wilbur C. Ziegler

*Deceased

Officers of the Corporation

Chairman of the Board

Francis W. Capper
68 Monmouth Street
Brookline, Massachusetts

President

Laurens MacLure
Boston Safe Deposit
and Trust Company
100 Franklin Street
Boston, Massachusetts

Vice Presidents

James F. Farr
15 State Street
Boston, Massachusetts

C. Vincent Vappi
240 Sidney Street
Cambridge, Massachusetts

Treasurer

Henry S. Rogerson
225 Franklin Street
Boston, Massachusetts

Clerk

James T. Mountz
225 Franklin Street
Boston, Massachusetts

Board of Trustees

Class of 1967

Herbert D. Adams, M.D.
Francis W. Capper
Harold C. Case
Lawrence H. Hansel
Elliott Henderson
Mrs. Halfdan Lee
Andrew J. Lord, Jr.
Laurens MacLure
Mrs. Sheldon E. Wardwell
Wilbar Whittemore

Class of 1968

F. Gorham Brigham, Jr.
Harold H. Cramer
Carl S. Ell
Robert H. Montgomery
Lester C. Peabody
Humphrey H. Swift
Miss Clara F. Trowbridge
Kenneth W. Warren, M.D.
Sinclair Weeks
John D. Young

Class of 1969

John Barnard, Jr.
Vincent P. Clarke
Charles C. Cunningham, Jr.
Edward Dana
Paul A. Draper
James F. Farr
Herbert H. Jaynes
Paul K. McElroy
Frank M. McGowan
Miss Amelia Peabody

Class of 1970

John Barnard
Manson H. Carter
Charles E. Hilliard
Mrs. Harry L. Jones
James T. Mountz
William M. Rand
Henry S. Rogerson
Stephen Sonnabend
Joseph P. Spang, Jr.
C. Vincent Vappi

Class of 1971

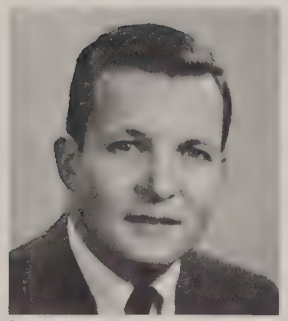
O. Kelley Anderson
Edward Dane
Arland A. Dirlam
Hollis G. Gerrish
Stephen C. Luce, Jr.
James K. Mathews
Albert Pratt
George I. Rohrbough
*Howard F. Root, M.D.
William B. Snow

R. D. Lowry *(unassigned)*

*Deceased

Board of Trustees Executive Committee

Francis W. Capper,
Chairman of the Board

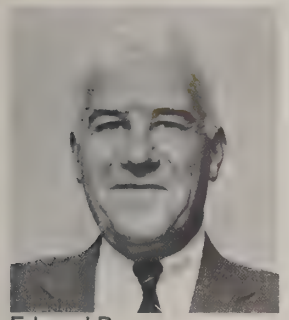


Laurens MacLure,
President

Henry S. Rogerson,
Treasurer

James T. Mountz,
Clerk of the Corporation

John Barnard, Jr.



Edward Dane

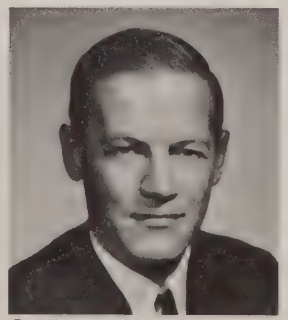
James F. Farr

Mrs. Halfdan Lee

R. D. Lowry
Executive Vice President

Albert Pratt

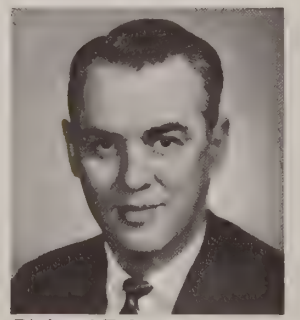
William B. Snow



C. Vincent Vappi

Alexander Marble, M.D.,
*Staff Representative

Herbert D. Adams, M.D.,
*Staff Representative



Richard E. Lee,
*Director

*Ex Officio

Administration

Executive Vice President
R. D. Lowry

Director
Richard E. Lee

Assistant Directors
Ellen Adams
Theodore F. Koch
Hubert D. Sycamore

Assistant Director and Director of Nursing
Ellen D. Howland

Night Administrator
John F. Slayton

Director of Administrative Services
Marjorie M. LeBeau

Chaplain to the Hospital
Ralph A. Curtis

Controller
Dean A. Annis

Director of Development
Maurice Fremont-Smith

Director of Dietetics
Charlotte L. Donaldson

Executive Housekeeper
Joseph E. Doherty

Laundry Manager
Roger G. Peterson

Director of Maintenance and Engineering
Donald L. Sabine

Director of Medical Record Department
E. Louise Seymour

Office Manager
Bertina Terkelsen

Director of Patient Service
Milton B. Nelson

Personnel Director
W. Dean Holdeman

Chief Pharmacist
Charles F. Schraub

Public Relations Director
Evans F. Houghton

Purchasing Agent
W. Clifford Fisher

Social Service Director
Lucile F. Palmer

Director of Surgical Services
Ruth E. Pendleton

Director of Volunteers
Irma A. Kellner

Report of the Friends of Deaconess

Mrs. George I. Rohrbough
President

The Friends of the Deaconess worked diligently this year. The reports from our projects were excellent and we continue to be grateful to the chairmen as well as the committee members and the volunteers who keep every area functioning.

Under the able chairmanship of Mrs. Theodore C. Pratt, the Coffee Shop reports a good year; it gave $13,000 to the Friends' Fund for the Hospital and $3,050 for a School of Nursing scholarship.

Mrs. Charles A. Hinkle announces that the Gift Shop gave $3,500 this year; and Mrs. George C. McClellan states that the Flower Shop made $1,104.08.

The Thrift Shop closed earlier than usual because the Hospital needed the space in the Deaconess Building for a new Observation Unit. In spite of this and a loss of fourteen days due to storms and holidays, the Shop's chairman, Mrs. Oliver R. Waite and her co-chairmen, Mrs. M. Duncan Harris and Mrs. S. St. John Morgan, report a gift of $10,916.91 to the Friends. The Thrift Shop moved in October to handsome new quarters in the basement of the Laundry Building, where contributions to sell and buyers to buy are welcomed.

The enthusiastic group of 12 ladies who worked under the chairmanship of Mrs. C. Cabell Bailey in Diversional Therapy kept that project going all year including during the summer months.

Mrs. Irma A. Kellner, Director of Volunteers, reports that 14,638 volunteer hours were given to projects of the Friends this year. We wish to offer a special "thank you" to the candy stripers, who gave their time in the summer to keep our work going.

One of the causes of the Friends has always been the Deaconess School of Nursing. Two events of the year are held specifically to raise money for scholarships to the School. We held our Christmas Bazaar in conjunction with the School of Nursing in early December. Mrs. Sheldon E. Wardwell was chairman of this event, which realized a profit of $2,310. A profit of $1,791.50 came from Deaconess Night at the Pops, which also benefits the School. Mrs. C. Cabell Bailey and Mrs. George A. Dempsey were co-chairmen of the April concert. They pointed out that this was Mr. Arthur Fiedler's thirty-seventh season with Pops and the Friends' twenty-seventh. Another source of income for the scholarship fund was the Woman's Society of Christian Service of the Methodist Churches of New England, which gave us $807.

Eight board meetings were held this year and we were privileged to be the guests of Mrs. James T. Mountz at her home in Weston for the Annual Picnic in June. We departed from our usual policy of having an "outside" speaker for our Annual Meeting in October in order to hear Dr. Bradley E. Copeland, Pathologist at Deaconess, who is internationally known for his work in quality control in the field of pathology. He spoke superbly on "The Challenge of Laboratory Medicine." On this occasion our Hospitality Committee, under the chairmanship of Mrs. Lawrence Dakin, served tea in Harris Hall.

We are grateful to Miss Dorothy B. Seccomb who so ably headed the Friends' share of the Development Program. She stated, "The Redevelopment Campaign has given the Friends of the Deaconess another dimension with which to prove their concern for the mounting need to enlarge the Hospital." Her committee of 5 members and 22 appointed team captains contacted 493 members of the Friends, most of whom responded wonderfully to the challenge. We are hopeful that when the additional, as yet undeclared gifts and pledges arrive our position will be satisfactory. The amount of time, energy and thought which Miss Seccomb expended can be measured not only in hours but also in the total dedication which she gave to the job.

This year our membership passed well over the 500 mark, under the leadership of Mrs. Lewis M. Hurxthal. This figure includes 60 Life Members.

This report would not be complete without mention of the new gift cart which was given to the Friends in memory of Miss Virginia Olmsted by her brother and sister. We are grateful to them for their gift as we were beholden to Miss Olmsted for her countless hours of volunteer service to the Friends.

We look back with pleasure on the year just passed and anticipate the year ahead with enthusiasm and joy as we contemplate the work and challenge to come.

New England Deaconess Hospital Balance Sheet

SEPTEMBER 24, 1967
AND SEPTEMBER 25, 1966

Assets

	1967	1966
GENERAL FUND		
Cash	$ 275,858	$ 163,641
Accounts receivable (less allowance for uncollectible accounts — 1967, $569,107; 1966, $527,194)	1,545,155	1,661,877
Inventories of supplies — at cost	258,746	224,850
Prepaid expenses	45,393	40,915
	2,125,152	2,091,283
SPECIAL PURPOSE FUNDS		
Cash	59,365	197,041
Investments — at cost (market value — 1967, $1,149,848; 1966, $633,870)	1,151,482	636,314
Grants receivable, including unexpended balances	352,626	334,096
	1,563,473	1,167,451
ENDOWMENT FUNDS		
Cash	3,895	1,135
Investments — at cost or contributed value (market value — 1967, $2,465,749; 1966, $2,069,785)	1,589,718	1,261,363
Real estate, equipment, and furnishings — at cost less accumulated depreciation — 1967, $495,755; 1966, $386,550 (Note 1)	5,138,668	5,246,036
Due from General Fund	132,265	99,694
	6,864,546	6,608,228
BUILDING AND EQUIPMENT FUNDS		
Cash	188,840	8,950
Investments — at cost or contributed value (market value — 1967, $3,507,782; 1966, $2,747,158)	3,507,849	2,749,059
Grant receivable	40,818	40,818
Construction in progress	453,448	215,184
Land, buildings, and equipment — at cost less accumulated depreciation — 1967, $5,870,688; 1966, $5,641,312 (Note 1)	7,803,718	7,848,664
	11,994,673	10,862,675
	$22,547,844	$20,729,637

Liabilities and Fund Balances

	1967	1966
GENERAL FUND		
Accounts payable, withheld taxes, and accrued expenses	$ 795,986	$ 683,057
Deferred income	78,843	61,662
Mortgage payments due within one year	147,104	140,476
Total	1,021,933	885,195
Due to Endowment Funds	132,265	99,694
General Fund balance	970,954	1,106,394
	2,125,152	2,091,283
SPECIAL PURPOSE FUNDS		
Accumulated gifts, bequests, and reserves for special purposes	1,235,832	848,339
Unexpended research grants	327,641	319,112
	1,563,473	1,167,451
ENDOWMENT FUNDS		
Mortgages payable through 1991 — installments due after one year (Note 1)	3,212,166	3,286,199
Fund balances	3,652,380	3,322,029
	6,864,546	6,608,228
BUILDING AND EQUIPMENT FUNDS (NOTE 1)		
Mortgage payable through 1978 — installments due after one year	860,332	933,403
Fund balances:		
Held for improvement and expansion	3,737,507	3,028,550
Invested in land, buildings, and equipment	7,396,834	6,900,722
	11,994,673	10,862,675
	$22,547,844	$20,729,637

See notes to financial statements on following page.

Statement of Income

FOR THE FISCAL YEARS ENDED SEPTEMBER 24, 1967 AND SEPTEMBER 25, 1966

	1967	1966
Operating income	$10,833,530	$ 9,298,969
Less — Free care, provision for uncollectible accounts, and contractual adjustments	511,711	557,611
Net operating income	10,321,819	8,741,358
Operating expenses:		
Professional care of patients:		
General	3,234,777	2,519,382
Special	3,393,840	2,888,718
Household and property	2,124,747	1,917,051
General services and administration	1,102,559	914,383
Employees' welfare	444,969	386,401
Depreciation	508,184	494,443
Total operating expenses	10,809,076	9,120,378
Loss from operations	487,257	379,020
Interest expense	38,673	40,567
Loss before non-operating income	525,930	419,587
Non-operating income:		
From endowment funds	238,434	203,881
Donations	65,069	68,287
Miscellaneous	20,709	25,896
Total non-operating income	324,212	298,064
Net loss transferred to general fund	$ 201,718	$ 121,523

NOTES TO FINANCIAL STATEMENTS

1. FUNDS FOR CENTRAL BUILDING ADDITION AND MORTGAGES PAYABLE

Building and equipment funds of $3,737,507 held for improvement and expansion at September 24, 1967 include unexpended contributions received for the Hospital's proposed Central Building addition. Pledges of additional contributions, aggregating approximately $2,500,000 at September 24, 1967, will be recorded as the cash is received.

The Hospital has entered into a mortgage loan commitment to provide additional funds for Central Building construction. Under the terms of this commitment two mortgage notes payable, aggregating $1,321,262 at September 24, 1967, will be refinanced by 1970 through a new mortgage note in the amount of $3,632,000. The Hospital's land and buildings, with the exception of research buildings and certain staff residences, are pledged as collateral against the existing mortgage notes.

2. EMPLOYEES' RETIREMENT PLAN

The Hospital's contributory retirement plan covers substantially all employees who have reached age 30. The Hospital provides amounts necessary to cover its current costs and to amortize the prior service cost in full by October 1, 1979, the twentieth anniversary of the plan. The provision for the year ended September 24, 1967 was approximately $117,000, of which $51,000 remained accrued at that date.

3. RESTATEMENT OF PRIOR YEARS' AMOUNTS

Certain prior years' amounts have been restated from amounts previously reported to reflect contractual adjustments with Massachusetts Hospital Service, Inc. in the years to which they apply. Accordingly, the general fund balance at September 26, 1965 has been increased by $90,340, the net loss for the fiscal year ended September 25, 1966 has been reduced by $9,660, and the general fund balance at September 25, 1966 has been increased by $100,000.

General Fund Account

FOR THE FISCAL YEARS ENDED
SEPTEMBER 24, 1967
AND SEPTEMBER 25, 1966

	1967	1966
Balance at beginning of year (Note 3)	$ 1,106,394	$ 1,011,049
Add:		
Unrestricted legacies received	552,263	199,556
Depreciation transfer from building and equipment funds	508,184	494,443
Total	2,166,841	1,705,048
Deduct:		
Transfer to building and equipment funds for replacement, construction, and mortgage reduction	441,906	277,575
Restricted for special purposes	552,263	199,556
Net loss	201,718	121,523
Total deductions	1,195,887	598,654
Balance at end of year (Note 3)	$ 970,954	$ 1,106,394

See notes to financial statements on previous page.

ACCOUNTANTS' OPINION

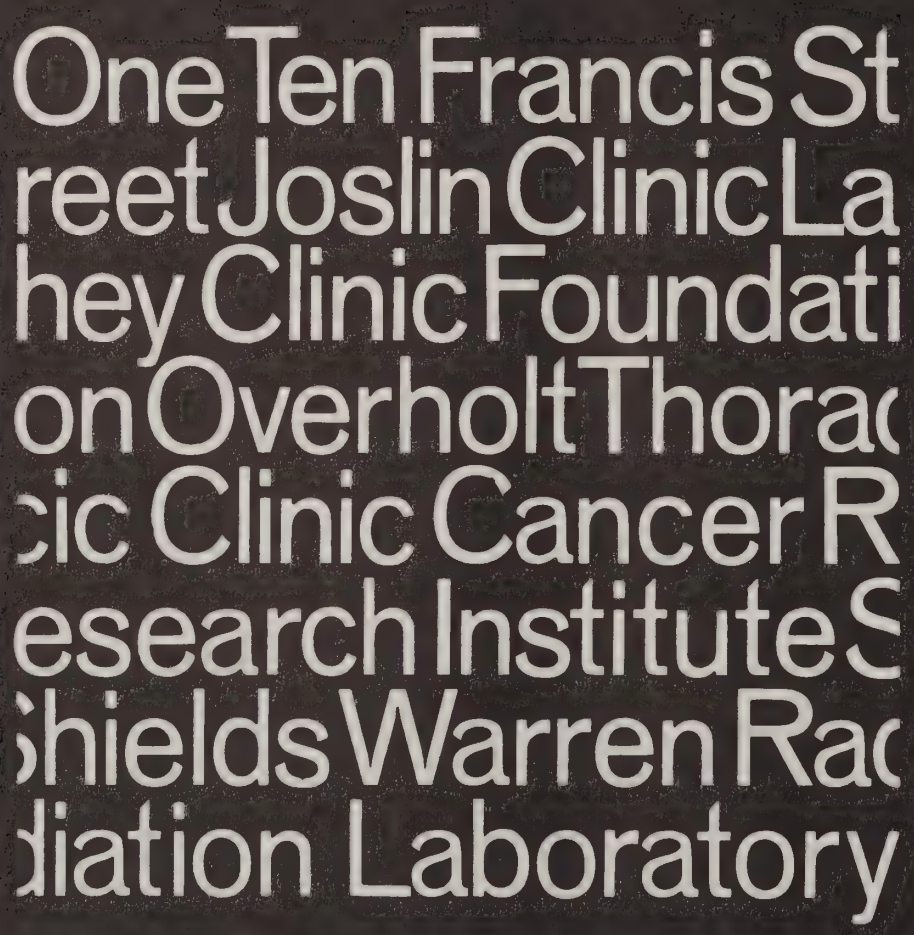
New England Deaconess Hospital:

We have examined the balance sheet of New England Deaconess Hospital as of September 24, 1967 and the related statements of income and general fund account for the fiscal year then ended. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, the accompanying financial statements present fairly the financial position of New England Deaconess Hospital at September 24, 1967 and the results of its general fund operations for the fiscal year then ended, in conformity with generally accepted accounting principles applied on a basis consistent with that of the preceding year (after revision of the financial statements for that year as explained in Note 3).

Haskins + Sells

Boston, Massachusetts
November 16, 1967


One Ten Francis St
reet Joslin Clinic La
hey Clinic Foundati
on Overholt Thorac
cic Clinic Cancer R
esearch Institute S
Shields Warren Rac
diation Laboratory

New England Deaconess Complex

The Medical Office Building at One Ten Francis Street, now four years after its opening, is known nationally and internationally for the completeness of its services and facilities. Its offices are fully occupied with almost every facet of medicine represented. Here the patient will find complete diagnostic services including laboratory and X-ray facilities, leading medical, surgical and dental specialists and living accommodations if a stay of several days is required.

The Joslin Clinic continues to maintain its high standard of excellence in the treatment of diabetes and its varied complications. Its services for outpatients are integrated with those for forty ambulatory inpatients cared for in the Hospital Teaching Unit of the Deaconess Hospital on the second floor of the Diabetes Foundation building. On the third and fourth floors of the Foundation are the Elliott P. Joslin Research Laboratories under the direction of Dr. George F. Cahill, Jr. A campaign is in progress to raise $2,500,000 for an addition to the building to be named for Dr. Howard F. Root.

Founded by Dr. Frank H. Lahey in 1923 as the Lahey Clinic, the organization, now a division of the Lahey Clinic Foundation, is one of the country's oldest and most renowned. A staff of 95 senior physicians and surgeons, 74 resident physicians and over 100 nurses and technicians provides departments of specialists in 16 different areas of medicine. The institution has long maintained a close working relationship with the Deaconess for hospital, surgical and laboratory service as well as resident training.

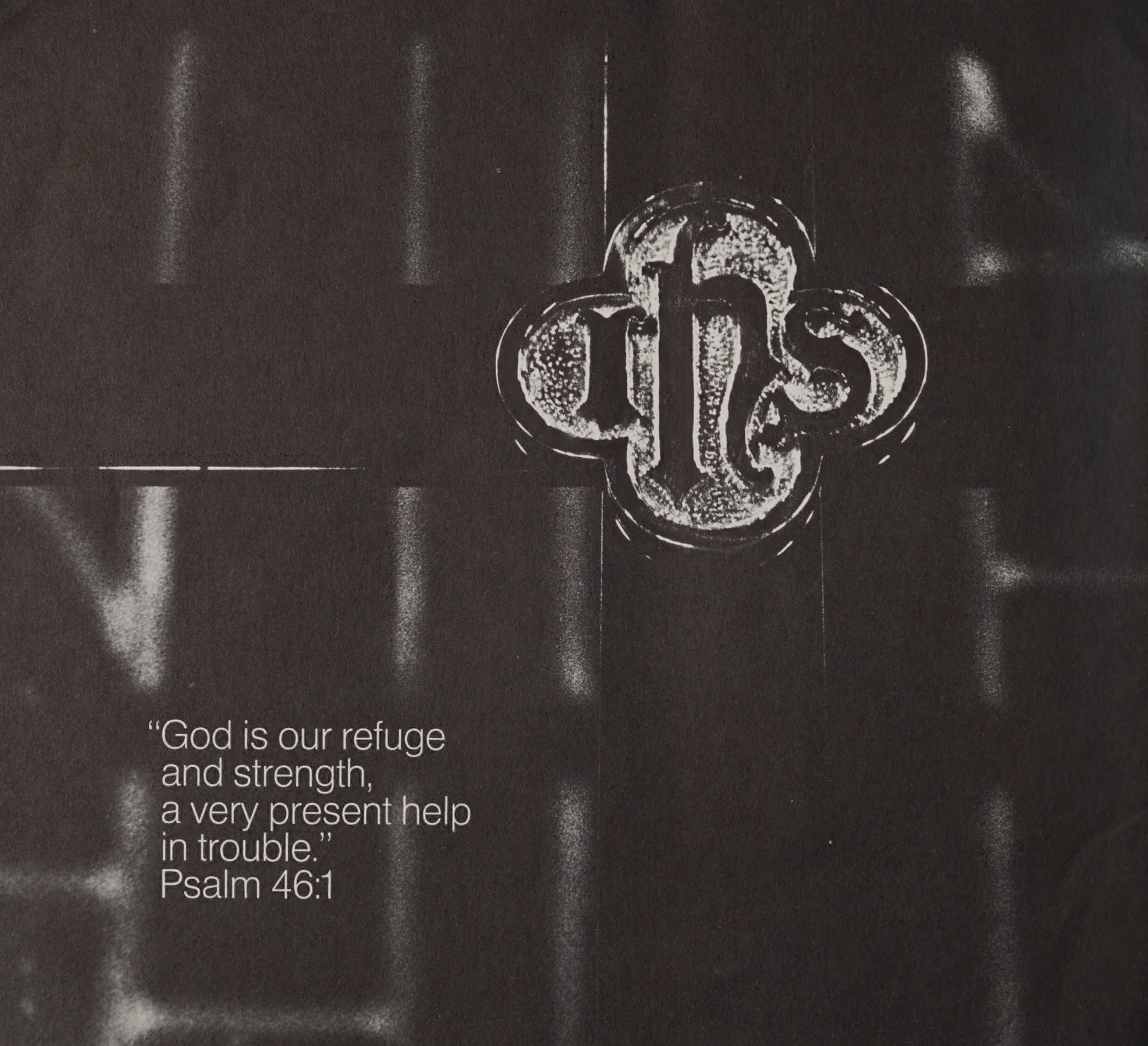
Surgery of the lung, esophagus, heart and great vessels continues to advance in the field of medicine, and the Overholt Thoracic Clinic maintains its place among the leaders. Doctors trained at the Clinic are scattered all over the world from the University of Cordoba in the Argentine to the University of Saigon. They are fully engaged in this specialty, doing research and teaching as well as surgery.

The Cancer Research Institute strengthens the Hospital by providing added new understanding of how the cells of man and laboratory animals vary in function and structure between healthy and cancerous states and how these variations may be used in diagnosis or treatment.

The staff of over 70 is supported by funds from five agencies, both governmental and private. Particularly useful is a general research support grant from the National Institutes of Health, which is administered by a committee of the Institute Staff and may be used for prompt exploration of new lines of research to determine their potential productivity, for acceleration of work of special promise, or to provide urgently needed scientific equipment.

This year 30 scientific articles have been published. The Institute Staff holds a number of academic appointments, chiefly at Harvard Medical School, with ties with Boston University and Tufts as well. Students have received specialized training in biochemistry and radiobiology.

At the Shields Warren Radiation Laboratory a program affiliated with the Harvard Medical School was initiated in the field of experimental diagnostic radiology. The program is especially concerned with the vascular system. Experimental studies in the fields of tissue transplantation and electron microscopy have been continued. Further developments are anticipated in the field of cancer radiation therapy with the collaboration of other hospitals in the Longwood area and the Harvard Medical School.


"God is our refuge
and strength,
a very present help
in trouble."
Psalm 46:1

He who dries his brothers tears
will never weep alone
He who calms his brothers fears
need never be afraid

New England Deaconess Hospital, 185 Pilgrim Road, Boston, Massachusetts 02215